C-2 Rev. 7/97



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

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Section	
Section	

Name of Candidate or Political Co	mmittee and Chairperson				
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	☐ Check if address cha	nge. City and Zip		ne Phone 15 JUI	
HO. Box 1002	E CIRCK II AUGUSS CIIA	Glerno Fran	83623 3		STATE
Name of Political Treasurer		MOUSTATA	DOUGH	1 10 1-11 11 11 11	1311 1 10 6 110
Kimra WULS				STA	TE OF IDAHU
Mailing Address	☐ Check if address cha	ange. City and Zip		me Phone	Work Phone
4.0. BOX 774		Colemns form	834a3 8	10-4021	227 - 1854
Section II		TYPE OF REPO	RT		·
Directions: To indicate the	type of report being	filed, fill in the appropriate		eck the appropria	te box(es). See the
instructional manual for report	orting periods and di	ue dates		Nin , 111	, 11
i nis repoi	t is for the period fro	om (1) / (0) / (0)	1 through	04/24	/
☐ 7 Day Pre-Primar	y Report	☐ 7 Day Pre-General Rep		Quarterly (April 3 ly filed by ballot i	0) measure committees)
30 Day Post-Prim	ary Report	☐ 30 Day Post-General F			
October 10 Pre-G	eneral Report	☐ Annual Report		☐ Quarterly (July 30) (only filed by ballot measure committees)	
Is this Report a	n amendment?	Yes 📮 No	Is this a Tern	nination Report?	□ Yes □ No
Section III	STATEMENT	OF NO CONTRIBUTION	NS OR EXP	ENDITURES	
Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below, fill in the appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV. I hereby certify that I have received no contributions and have made no expenditures during this reporting period from//					
Section IV					
Section IV To reach your Calendar Yea		SUMMARY		 UMN I	COLUMN II
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DETAILED SUMMARY PAGE

Name of Candidate or Committee	Report Covering the Period From \(\int \frac{10}{10} \cdot \frac{04}{10} \tag{4} \) to \(\frac{04}{24} \cdot \frac{04}{10} \)
ł .	MIZED CONTRIBUTIONS of Fifty Dollars (\$50.00) or Less This Period
Total Number_	Total Amount \$
l	EMIZED EXPENDITURES 5 Than Twenty-Five Dollars (\$25.00) This Period
Total Number	Total Amount \$ D

	Total This Period
Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	s — 0 —
Itemized Contributions (total all Schedule A sheets)	\$ -0-
Total Contributions (also enter this figure on page 1, Section IV, line 3)	s +
Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ -
Itemized Expenditures (total all Schedule B sheets)	s 300
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 300

SCHEDULE B ITEMIZED EXPENDITURES

Page	of
Lι	

of Twenty-Five Dollars (\$25.00) or more this period

	date or Committee		
	ic Milio	Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
06/21/04	Opera Thadre al8 E. Idaho-Box 402 Glemins Ferry, ID 83123	s_300.00	\$
Purpose of Ab	ove Expenditure: Campaign ad in theatre program	(full page)	
		\$	\$
''		3	3
Purpose of Abo	ove Expenditure:		
	3.	\$	s
<i>'</i> -'			
Purpose of Abo	ove Expenditure:	f	
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		5	9
Purpose of Ab	ove Expenditure:		
	8.		
		s	\$
Purpose of Ab	ove Expenditure:		
	9.		
		s	s
Purpose of Ab	ove Expenditure:		
	Subtotals of Columns A & B	s_300	s
	Total This Page (add columns A & B)		\$ 300